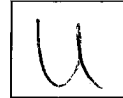


**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

**ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY**



E-04204A  
UNS Electric, Inc.  
Attn: Karen Kissinger – Vice President, Controller & Chief Compliance Officer  
P.O. Box 711, Mail Stop OH120  
Tucson, AZ 85702

NO POSTAGE  
NECESSARY  
IF MAILED  
IN THE  
UNITED STATES

7-17

2006 COMA  
UTILITIES

**ANNUAL REPORT**

**FOR YEAR ENDING**

<b>12</b>	<b>31</b>	<b>2006</b>
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FOR COMMISSION USE

<b>ANN 01</b>	<b>06</b>
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PROCESSED BY:

4-17-07

SCANNED

## COMPANY INFORMATION

**Company Name (Business Name)** UNS Electric, Inc.

**Mailing Address** P.O. Box 711, Mail Stop OH-120

(Street)

Tucson

(City)

Arizona

(State)

85702

(Zip)

520-571-4000

Telephone No. (Include Area Code)

520-571-4160

Fax No. (Include Area Code)

N/A

Pager/Cell No. (Include Area Code)

**Email Address** aeckert@tep.com or kkissinger@tep.com

**Local Office Mailing Address** P.O. Box 711, Mail Stop OH-120

(Street)

Tucson

(City)

Arizona

(State)

85702

(Zip)

520-571-4000

Local Office Telephone No. (Include Area Code)

520-571-4160

Fax No. (Include Area Code)

N/A

Pager/Cell No. (Include Area Code)

**Email Address** aeckert@tep.com or kkissinger@tep.com

## MANAGEMENT INFORMATION

**Management Contact:** David Couture

(Name)

Director, Regulatory Services

(Title)

One South Church Avenue, Mail Stop UE-201

(Street)

Tucson

(City)

Arizona

(State)

85702

(Zip)

520-884-3752

Telephone No. (Include Area Code)

520-884-3601

Fax No. (Include Area Code)

N/A

Pager/Cell No. (Include Area Code)

**Email Address** dcouture@tep.com

### **On Site Managers:**

Tom Ferry, Vice President and General Manager

(Name)

David Thomas, T&D Operations General Manager

(Name)

2498 Airway Ave. Kingman, AZ 86402

(Street)

(City)

(State)

(Zip)

4350 E. Irvington Rd/PO Box 711 Tucson, AZ 85702

(Street)

(City)

(State)

(Zip)

520-681-8901 520-681-8915 520-715-7234

Telephone No.

Fax No.

Pager/Cell No.

(Include Area Code) (Include Area Code) (Include Area Code)

520-745-3429 520-571-4101 520-403-0813

Telephone No.

Fax No.

Pager/Cell No.

(Include Area Code) (Include Area Code) (Include Area Code)

**Email Address** tferry@uesaz.com

dthomas@tep.com

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

**Statutory Agent:** Diana K. Durako

(Name)

One South Church Avenue, Suite 1820

(Street)

Tucson

(City)

Arizona

(State)

85701

(Zip)

520-571-4000 ext. 3652

Telephone No. (Include Area Code)

520-884-3612

Fax No. (Include Area Code)

N/A

Pager/Cell No. (Include Area Code)

**Attorney:** Raymond S. Heyman

(Name)

P.O. Box 711

(Street)

Tucson

(City)

Arizona

(State)

85702

(Zip)

520-884-3635

Telephone No. (Include Area Code)

520-884-3612

Fax No. (Include Area Code)

N/A

Pager/Cell No. (Include Area Code)

☐ Please mark this box if the above address(es) have changed or are updated since the last filing.

### OWNERSHIP INFORMATION

Check the following box that applies to your company:

- |                                                 |                                                                                      |
|-------------------------------------------------|--------------------------------------------------------------------------------------|
| <input type="checkbox"/> Sole Proprietor (S)    | <input checked="" type="checkbox"/> C Corporation (C) (Other than Association/Co-op) |
| <input type="checkbox"/> Partnership (P)        | <input type="checkbox"/> Subchapter S Corporation (Z)                                |
| <input type="checkbox"/> Bankruptcy (B)         | <input type="checkbox"/> Association/Co-op (A)                                       |
| <input type="checkbox"/> Receivership (R)       | <input type="checkbox"/> Limited Liability Company                                   |
| <input type="checkbox"/> Other (Describe) _____ |                                                                                      |

### COUNTIES SERVED

Check the box below for the county/ies in which you are certificated to provide service:

- |                                                |                                   |                                            |
|------------------------------------------------|-----------------------------------|--------------------------------------------|
| <input type="checkbox"/> APACHE                | <input type="checkbox"/> COCHISE  | <input type="checkbox"/> COCONINO          |
| <input type="checkbox"/> GILA                  | <input type="checkbox"/> GRAHAM   | <input type="checkbox"/> GREENLEE          |
| <input type="checkbox"/> LA PAZ                | <input type="checkbox"/> MARICOPA | <input checked="" type="checkbox"/> MOHAVE |
| <input type="checkbox"/> NAVAJO                | <input type="checkbox"/> PIMA     | <input type="checkbox"/> PINAL             |
| <input checked="" type="checkbox"/> SANTA CRUZ | <input type="checkbox"/> YAVAPAI  | <input type="checkbox"/> YUMA              |
| <input type="checkbox"/> STATEWIDE             |                                   |                                            |

## SERVICES AUTHORIZED TO PROVIDE

Check the following box/es for the services that you are authorized to provide:

☒ **Electric**

- ☒ Investor Owned Electric
- ☐ Rural Electric Cooperative
- ☐ Utility Distribution Company
- ☐ Electric Service Provider
  - ☐ Transmission Service Provider
  - ☐ Meter Service Provider
  - ☐ Meter Reading Service Provider
  - ☐ Billing and Collection
  - ☐ Ancillary Services
  - ☐ Generation Provider
  - ☐ Aggregator/Broker

☐ **Telecommunications**

- ☐ Incumbent Local Exchange Carrier
- ☐ Interexchange Carrier
- ☐ Competitive Local Exchange Carrier
- ☐ Reseller
- ☐ Alternative Operator Service Provider

☐ **Gas**

- ☐ Natural Gas
- ☐ Propane

☐ **Other** (Specify) \_\_\_\_\_  
\_\_\_\_\_

## STATISTICAL INFORMATION

### TELECOMMUNICATION UTILITIES ONLY

Total residence local exchange access lines	_____
Total business local exchange access lines	_____
Total revenue from Arizona operations	\$ _____
Total income from Arizona operations	\$ _____
Value of assets used to serve Arizona customers	\$ _____
Accumulated depreciation associated with those assets	\$ _____

**STATISTICAL INFORMATION (CONT'D)**

**ELECTRIC UTILITY PROVIDERS ONLY**

Total number of customers (at 12/31/2006)	92,918	
Residential	79,342	
Commercial	11,068	
Industrial	12	
Public street and highway lighting	2,495	
Irrigation		
Resale	1	
Total kilowatt-hours sold	1,614,083,857	kWh
Residential	803,980,371	
Commercial	613,333,447	
Industrial	191,171,477	
Public street and highway lighting	2,934,255	
Irrigation		
Resale	2,664,307	
Maximum Peak Load	423	MW

**GAS UTILITIES ONLY**

Total number of customers		
Residential		
Commercial		
Industrial		
Irrigation		
Resale		
Total therms sold		therms
Residential		
Commercial		
Industrial		
Irrigation		
Resale		

**VERIFICATION  
AND  
SWORN STATEMENT  
Intrastate Revenues Only**

**VERIFICATION**

STATE OF Arizona

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME)
<b>Pima</b>
NAME (OWNER OR OFFICIAL) TITLE
<b>Karen G. Kissinger, VP, Controller &amp; CCO</b>
COMPANY NAME
<b>UNS Electric, Inc.</b>

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2006

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**


IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2006 WAS:

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 171,189,054

(THE AMOUNT IN BOX ABOVE  
INCLUDES \$ 11,667,563  
IN SALES AND FRANCHISE TAXES BILLED, OR  
COLLECTED)

**\*\*REVENUE REPORTED ON THIS PAGE MUST  
INCLUDE SALES TAXES BILLED OR  
COLLECTED. IF FOR ANY OTHER REASON,  
THE REVENUE REPORTED ABOVE DOES NOT  
AGREE WITH TOTAL OPERATING REVENUES  
ELSEWHERE REPORTED, ATTACH THOSE  
STATEMENTS THAT RECONCILE THE  
DIFFERENCE. (EXPLAIN IN DETAIL)**

  
\_\_\_\_\_  
SIGNATURE OF OWNER OR OFFICIAL  
520 - 745-3122  
\_\_\_\_\_  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

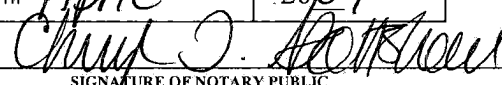
11th

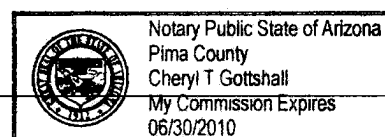
DAY OF

(SEAL)

COUNTY NAME
<u>Pima</u>
MONTH
<u>April</u>
20 <u>07</u>

MY COMMISSION EXPIRES 06/30/2010

  
\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC



VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
INTRASTATE REVENUES ONLY

STATE OF ARIZONA

I, THE UNDERSIGNED

OF THE

COUNTY OF (COUNTY NAME) <b>Pima</b>	
NAME (OWNER OR OFFICIAL) <b>Karen G. Kissinger</b>	TITLE <b>VP, Controller &amp; CCO</b>
COMPANY NAME <b>UNS Electric, Inc.</b>	

DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION

FOR THE YEAR ENDING

MONTH	DAY	YEAR
12	31	2006

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2006 WAS:

ARIZONA INTRASTATE GROSS OPERATING REVENUES

\$ 86,914,064

(THE AMOUNT IN BOX AT LEFT

INCLUDES \$ 5,950,800

IN SALES AND FRANCHISE TAXES BILLED, OR COLLECTED

\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.

X Karen G. Kissinger  
SIGNATURE OF OWNER OR OFFICIAL

520-745-3122  
TELEPHONE NUMBER

SUBSCRIBED AND SWORN TO BEFORE ME

A NOTARY PUBLIC IN AND FOR THE COUNTY OF

THIS

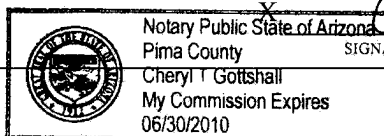
1/4

DAY OF

(SEAL)

MY COMMISSION EXPIRES

NOTARY PUBLIC NAME <u>Cheryl T. Gottshall</u>	
COUNTY NAME <u>Pima</u>	
MONTH <u>April</u>	YEAR <u>2007</u>



X Cheryl T. Gottshall  
SIGNATURE OF NOTARY PUBLIC

## **FINANCIAL INFORMATION**

Attach to this annual report a copy of the companies' year-end (Calendar Year 2006) financial statements. If you do not compile these reports, the Utilities Division will supply you with blank financial statements for completion and filing. **ALL INFORMATION MUST BE ARIZONA-SPECIFIC AND REFLECT OPERATING RESULTS IN ARIZONA.**

See attached financial statements.